

INTISARI

PERBEDAAN RESOLUSI JUMLAH DEVIASI SEGMENT-ST ANTARA STRATEGI FARMAKO-INVASIF DENGAN STRATEGI INTERVENSI KORONER PERKUTAN PRIMER PADA PASIEN INFARK MIOKARD AKUT DENGAN ELEVASI SEGMENT-ST (IMA-EST) DI RSUP DR. SARDJITO

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Latar Belakang: Penyakit jantung koroner (PJK) merupakan pembunuh nomor satu di Indonesia maupun di dunia. Penatalaksanaan infark miokard akut dengan elevasi segmen-ST (IMA-EST) memerlukan kecepatan dalam diagnosis dan terapi. Secara global, banyak pasien IMA-EST yang datang ke rumah sakit, tidak mendapatkan tindakan intervensi koroner perkutan primer (IKP Primer) yang merupakan pilihan terapi utama. Pasien-pasien yang tidak mencapai target waktu yang direkomendasikan pedoman tatalaksana (<120 menit) diprediksikan memiliki luaran yang lebih buruk. Farmako-invasif menjadi strategi alternatif problem ini. Strategi ini terbukti lebih unggul dibandingkan pendekatan konservatif terdahulu yaitu fibrinolisis semata. Perubahan segmen-ST baik berupa elevasi dan depresi pada gambaran elektrokardiogram (Deviasi Segmen-ST) merupakan salah satu tanda diagnostik sekaligus prognostik infark miokard. Jumlah total deviasi segmen-ST sendiri menggambarkan aliran mikrosirkulasi koroner area miokard yang mengalami gangguan. Resolusinya menunjukkan nilai prognostik yang relevan. Perbedaan resolusi jumlah deviasi segmen-ST antara strategi farmako-invasif dibandingkan dengan strategi IKP Primer di RSUP dr. Sardjito masih belum diketahui. **Tujuan:** Penelitian ini bertujuan untuk mengetahui perbedaan resolusi jumlah deviasi segmen-ST pada pasien IMA-EST yang menjalani strategi Farmako-invasif dibandingkan dengan strategi IKP Primer. **Metode:** Masing-masing empat puluh lima pasien IMA-EST yang menjalani strategi Farmako-invasif dibandingkan dengan menjalani IKP Primer. Kemudian dilakukan penilaian resolusi jumlah deviasi segmen-ST pada kedua kelompok tersebut dengan menggunakan desain penelitian kohort retrospektif. Nilai $\geq 50\%$ dianggap resolusi signifikan dan $< 50\%$ dianggap resolusi tidak signifikan. Penilaian resolusi jumlah deviasi segmen-ST dilakukan oleh dua orang spesialis jantung yang sudah dilakukan uji kesesuaian *kappa*. Hasil dianalisis menggunakan analisis komparasi dan uji regresi logistik. **Hasil:** Perbedaan resolusi jumlah deviasi segmen-ST antara pasien IMA-EST yang menjalani strategi Farmako-invasif dibandingkan dengan strategi IKP primer di RSUP dr. Sardjito sebesar 26,63%, dengan hasil 84,40% pada kelompok strategi Farmako-invasif vs. 57,77% pada kelompok strategi IKP Primer, RR=1,46 (IK 95 %, 1,10-1,93) dan $p=0,005$, dengan batas pemaknaan $p<0,05$ maka hasil bermakna secara statistik. **Simpulan:** Terdapat resolusi jumlah deviasi segmen-ST yang lebih tinggi secara bermakna pada pasien IMA-EST yang menjalani strategi Farmako-invasif dibandingkan strategi IKP Primer di RSUP dr. Sardjito. **Kata Kunci:** IMA-EST, IKP Primer, Farmako-invasif, Resolusi jumlah deviasi segmen-ST

ABSTRACT

THE DIFFERENCES OF SUM ST-DEVIATION RESOLUTION OF STEMI PATIENTS WHO UNDERGONE PHARMACO-INVASIVE STRATEGY COMPARED TO PRIMARY CORONARY INTERVENTION STRATEGY IN DR. SARDJITO HOSPITAL

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Background: Coronary arterial disease (CAD) is one of the leading causes of death both in Indonesia and the world. Management of ST-segment elevation myocardial infarction (STEMI) requires immediate action in diagnosis and therapy. Globally, many of STEMI patients who came to the hospital, did not get primary percutaneous coronary intervention (Primary PCI) as the standard treatment option. Patients who do not reach guideline-targeted time recommendation (<120 minutes) are predicted to have a worse outcome. Pharmacoinvasive is an alternative strategy for this problem. This strategy proved to be superior to the previous conservative approach, i.e., Fibrinolysis only. The ST-segment changes in the form of elevation and depression on electrocardiogram (ST-segment deviation) are prognostic and diagnostic signs of myocardial infarction simultaneously. The total sum ST-deviations alone, reflects a coronary microcirculation of affected myocardial area. The resolution of sum ST-segment deviation, demonstrates the relevant prognostic value. The difference of sum of ST-deviation resolution between the pharmacoinvasive strategy compared to the Primary PCI strategy in dr. Sardjito Hospital is still unknown. **Objective:** This study aims to determine the difference between sum ST-segment deviation resolution in STEMI patients who undergone Pharmacoinvasive strategy with to the Primary PCI strategy. **Methods:** Forty-five IMA-EST patients who underwent Pharmacoinvasive strategy compared to Forty-five patients who underwent Primary IKP. Then we measured the sum ST-segment deviation resolution in two groups using a retrospective cohort study design. Cut off $\geq 50\%$ are considered significant resolution and $<50\%$ are considered insignificant resolution. The assessment of sum ST-segment deviation resolution was measured by two cardiologists who had already carried out the kappa suitability test. The results will be analyzed using comparative analysis and logistic regression test. **Results:** The difference of sum ST-segment deviation resolution between STEMI patients who underwent Pharmacoinvasive strategy compared with Primary PCI strategy at dr. Sardjito is 26,63%, with a result of 84,40% in the Pharmacoinvasive vs. 57,77 % % in Primary PCI strategy group, RR = 1,46 (95% CI, 1,10-1,93) and $p = 0,005$, with a limit of $p < 0,05$, this result is statistically significant. **Conclusion:** The Sum ST-segment deviation resolution is significantly higher in IMA-EST patients who undergone Pharmacoinvasive strategy compared to Primary PCI strategy at dr. Sardjito Hospital. **Keywords:** STEMI, Primary PCI, Pharmacoinvasive, Sum ST-segment deviation resolution.